

P 15000030148

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

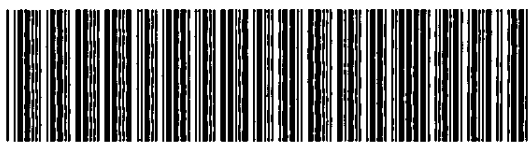
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/30/15--01046--011 **78.75

FILED
15 MAR 30 PM 3.03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/2/15

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: LENIN LEARNING CENTER, INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: ANAELY ADVINCULA
Name (Printed or typed)
13550 SW 88TH STREET STE 240
Address
MIAMI, FLORIDA 33186
City, State & Zip
(305)586-4510
Daytime Telephone number
ANAELY.ADVINCULA@LENINHOMECARE.COM
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

ARTICLE I NAME
The name of the corporation shall be: LENIN LEARNING CENTER, INC

15 MAR 30 PM 3 03

ARTICLE II PRINCIPAL OFFICE
Principal street address
13550 SW 88TH STREET STE 240
MIAMI, FLORIDA 33186

Mailing address, if different is: SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES
The number of shares of stock is: 50

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>ILEANA ALVAREZ, P, CEO</u>	Name and Title:	_____
Address	<u>13550 SW 88TH STREET</u> <u>SUITE 240</u> <u>MIAMI, FLORIDA 33186</u>	Address:	_____ _____ _____

Name and Title:	<u>ANAELY ADVINCULA, VP, CFO</u>	Name and Title:	_____
Address	<u>13550 SW 88TH STREET</u> <u>SUITE 240</u> <u>MIAMI, FLORIDA 33186</u>	Address:	_____ _____ _____

Name and Title:	_____	Name and Title:	_____
Address	_____ _____ _____	Address:	_____ _____ _____

Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

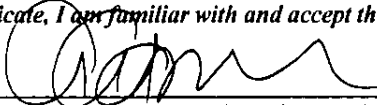
Name: ANAELY ADVINCULA
 Address: 13550 SW 88TH STREET STE 240
MIAMI, FLORIDA 33186

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: ANAELY ADVINCULA
 Address: 13550 SW 88TH STREET STE 240
MIAMI, FLORIDA 33186

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

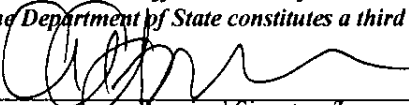


 Required Signature/Registered Agent

03/18/2015

 Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



 Required Signature/Incorporator

03/18/2015

 Date

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